

PROVIDER BULLETIN



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PRIOR AUTHORIZATION REMOVAL

APPLIES TO: Providers who bill Current Procedural Terminology (CPT) Codes 19330, 21235, 43770, 54161 and 64590.

EFFECTIVE: July 1, 2022

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CERTAIN CPT CODES WILL NO LONGER REQUIRE A PRIOR AUTHORIZATION

Effective for dates of service on or after July 1, 2022, the following CPT codes will no longer require a prior authorization.

- 19330-Removal of ruptured breast implant, including implant contents (eg, Saline, silicone gel).
- 21235-Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft).
- 43770-Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components).
- 54161-Circumcision, surgical excision other than clamp, device, or dorsal slit; older than 28 days of age.
- 64590-Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling.

Providers must keep adequate documentation in the patient's medical record indicating the need for the procedures. If the MO HealthNet Division (MHD) or MHD's authorized agent asks to see the documentation, it must be provided.

APPLICABILITY

Managed Care enrolled providers should contact their Managed Care Organization for questions regarding requirements for these CPT codes.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at http://dss.mo.gov/mhd/providers/pages/bulletins.htm. Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Provider Communications Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

Provider Communications Hotline 573-751-2896